



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

November 18, 2013

Jacque Kopaska  
4788 NE 28<sup>th</sup> Court  
Des Moines, IA 50317

Dear Ms Kopaska,

This letter is in regards to the November 15, 2013 compliance check of your Category B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1)d Medicines are given only with written authorization from the doctor or parent.

**Any time a child takes a medication, over the counter or prescription, a medication consent form should be completed and signed by the parent. This document should be kept in the child's file. I would also suggest using this for items such as sun screen, pedia lite, and ora gel. This form was provided to you during our spot check.**

☐ 110.5(1)r If not fenced, both in and aboveground pools must have a cover that meets or exceeds ASTM standards when not in use.

☐ 110.5(1)r Fence for aboveground pool is four feet above sidewalls of pool. Height of pool walls not included in measurement.

**You indicated you have an above ground pool but have not put it up recently. These are the criteria that need to be in place before the pool is filled. As an example, if your pool is 3 feet on the sidewalls, you will need a 7 foot fence. Below are additional code and criteria that need to be adhered to specific to the pool.**

☐ 110.5(1)r Wading pools are drained daily and are inaccessible to children when not in use.

☐ 110.5(1)s If children use above ground or in-ground swimming pools:

☐ 110.5(1)s Written permission from the parents is on file.

☐ 110.5(1)s Equipment needed to rescue a child or adult is accessible.

☐ 110.5(1)s The provider accompanies and provides constant supervision while the children use the pool.

☐ 110.5(1)u The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.

**It was discussed that you will need to put something in writing pertaining expectations in care related to fever, vomiting, and other contagious illnesses.**

☐ 110.5(1)v The provider has written policies about responding to health-related emergencies.

**There is a sample in the packet of forms left with you. Recommendations were also made to identify in writing that you as a provider are not responsible for any medical expenses, such as an ambulance fee, if an emergency were to occur with a daycare child.**

**110.5(2) A provider file is maintained and contains:**

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every two years.

**You indicated a plan for yourself and your household members to have a current physical scheduled. There are new forms that need to be used which have been included in this mailing.**

☐ 110.5(4) The certificate of registration is displayed in a conspicuous place.

**I understand it fell and broke. Please re-hang upon repair.**

**110.5(8) Children's Files**

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

**Please review all of your children's files to make sure they have the following information in each folder and that the information is updated and current. There are forms in the packet that was left with you that can assist you in meeting these requirements.**

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

**Use pages 1, 2**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

**Use pages 1, 2**

- ☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

**Use page 3**

- ☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

- ☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

**Page 5**

- ☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.

**Page 4**

- ☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

**Page 4 or 9**

- ☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

**Page 1**

- ☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.

**Ask parents to obtain from doctor.**

- ☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

- ☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child.

- ☐ 110.5(8)j Injury report forms to document injuries requiring first aid or medical care.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever**

steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations on or before December 23, 2013.

☐ Based on the items out of compliance listed above, you will be required to have a re-check or follow-up visit to your home. This visit will occur on or after \_\_\_\_\_.

x ☐ Based on the items out of compliance listed above, a re-check or follow-up visit to your home is not necessary. However, it is essential you come into complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: December 23, 2013.**

X \_\_\_\_\_  
Signature Date

Please call me if you have any further questions.

Sincerely,



Melissa Crawford  
Child Development Home Compliance Checks  
DHS, Dallas County  
210 N. 10<sup>th</sup> Street  
Adel, IA 50003  
(515) 993-1742 (ph)  
(515-) 564-4033 (f)

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at (Text field for phone).

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://www.dhs.state.ia.us/Consumers/Child\\_Care/Professional\\_Development.html](http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes:  
441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).